

<b>FORM B1</b>		<b>United States Bankruptcy Court</b>		<b>Voluntary Petition</b>					
<b>Northern District of Illinois</b>									
Name of Debtor (if individual, enter Last, First, Middle): <b>Mattox, Richard V</b>		Name of Joint Debtor (Spouse) (Last, First, Middle): <b>Mattox, Kimberly K</b>							
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names):							
Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): <b>6834</b>		Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): <b>5492</b>							
Street Address of Debtor (No. & Street, City, State & Zip Code): <b>3347 W Exchange St Crete, IL 60417-2042</b>		Street Address of Joint Debtor (No. & Street, City, State & Zip Code): <b>3347 W Exchange St Crete, IL 60417-2042</b>							
County of Residence or of the Principal Place of Business: <b>Will</b>		County of Residence or of the Principal Place of Business: <b>Will</b>							
Mailing Address of Debtor (if different from street address):		Mailing Address of Joint Debtor (if different from street address):							
Location of Principal Assets of Business Debtor (if different from street address above):									
<b>Information Regarding the Debtor (Check the Applicable Boxes)</b>									
<b>Venue</b> (Check any applicable box) <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.									
<b>Type of Debtor</b> (Check all boxes that apply) <input checked="" type="checkbox"/> Individual(s) <input type="checkbox"/> Railroad <input type="checkbox"/> Corporation <input type="checkbox"/> Stockbroker <input type="checkbox"/> Partnership <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Other _____ <input type="checkbox"/> Clearing Bank			<b>Chapter or Section of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Sec. 304 - Case ancillary to foreign proceeding						
<b>Nature of Debts</b> (Check one box) <input checked="" type="checkbox"/> Consumer/Non-Business <input type="checkbox"/> Business			<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3.						
<b>Chapter 11 Small Business</b> (Check all boxes that apply) <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101 <input type="checkbox"/> Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)									
<b>Statistical/Administrative Information</b> (Estimates only) <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.						THIS SPACE IS FOR COURT USE ONLY			
Estimated Number of Creditors		1-15	16-49	50-99	100-199		200-999	1000-over	
		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
Estimated Assets		\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million		\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Estimated Debts		\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million
		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Voluntary Petition</b> (This page must be completed and filed in every case)		Name of Debtor(s): <b>Mattox, Richard V &amp; Mattox, Kimberly K</b>	
<b>Prior Bankruptcy Case Filed Within Last 6 Years</b> (If more than one, attach additional sheet)			
Location Where Filed: <b>None</b>		Case Number:	Date Filed:
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>None</b>		Case Number:	Date Filed:
District:		Relationship:	Judge:
<b>Signatures</b>			
<b>Signature(s) of Debtor(s) (Individual/Joint)</b> I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.		<b>Exhibit A</b> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11) <input type="checkbox"/> Exhibit A is attached and made a part of this petition.	
<input checked="" type="checkbox"/> <u>/s/ Richard V Mattox</u> Signature of Debtor <b>Richard V Mattox</b>  <input checked="" type="checkbox"/> <u>/s/ Kimberly K Mattox</u> Signature of Joint Debtor <b>Kimberly K Mattox</b>  Telephone Number (If not represented by attorney) <b>October 14, 2005</b> Date		<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.  <input checked="" type="checkbox"/> <u>/s/ Sarah R MacMaster</u> <b>10/14/05</b> Signature of Attorney for Debtor(s) Date	
<b>Signature of Attorney</b> <input checked="" type="checkbox"/> <u>/s/ Sarah R MacMaster</u> Signature of Attorney for Debtor(s) <b>Sarah R MacMaster 6270200</b> Printed Name of Attorney for Debtor(s) <b>Gleason And MacMaster</b> Firm Name <b>77 W Washington, Ste 1218</b> Address <b>Chicago, IL 60602</b>  <b>(312) 578-9530</b> Telephone Number <b>October 14, 2005</b> Date		<b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No	
<b>Signature of Debtor (Corporation/Partnership)</b> I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.  <input checked="" type="checkbox"/> _____ Signature of Authorized Individual  _____ Printed Name of Authorized Individual  _____ Title of Authorized Individual  _____ Date		<b>Signature of Non-Attorney Petition Preparer</b> I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.  _____ Printed Name of Bankruptcy Petition Preparer  _____ Social Security Number (Required by 11 U.S.C. § 110(c).)  _____ Address  _____ Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:  If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.  <input checked="" type="checkbox"/> _____ Signature of Bankruptcy Petition Preparer  _____ Date  A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.	

**IN RE:**

Case No. \_\_\_\_\_

**Mattox, Richard V & Mattox, Kimberly K**

Chapter **7**

Debtor(s)

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E, and F to determine the total amount of the debtor's liabilities.

**AMOUNTS SCHEDULED**

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	<b>Yes</b>	<b>1</b>	<b>0.00</b>		
B - Personal Property	<b>Yes</b>	<b>2</b>	<b>507,520.00</b>		
C - Property Claimed as Exempt	<b>Yes</b>	<b>1</b>			
D - Creditors Holding Secured Claims	<b>Yes</b>	<b>1</b>		<b>0.00</b>	
E - Creditors Holding Unsecured Priority Claims	<b>Yes</b>	<b>1</b>		<b>0.00</b>	
F - Creditors Holding Unsecured Nonpriority Claims	<b>Yes</b>	<b>15</b>		<b>39,604.50</b>	
G - Executory Contracts and Unexpired Leases	<b>Yes</b>	<b>1</b>			
H - Codebtors	<b>Yes</b>	<b>1</b>			
I - Current Income of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			<b>2,599.49</b>
J - Current Expenditures of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			<b>2,630.00</b>
Total Number of Sheets in Schedules		<b>25</b>			
Total Assets			<b>507,520.00</b>		
Total Liabilities				<b>39,604.50</b>	

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H" for Husband, "W" for Wife, "J" for Joint, or "C" for Community in the column labeled "HWJC." If the debtor holds no interest in real property, write "None" under "Description and Location of Property".

Do not include interests in executory contracts and unexpired leases on the schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a security interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim".

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	H W J C	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				
<b>TOTAL</b>			<b>0.00</b>	

(Report also on Summary of Schedules)

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None". If additional space is needed in any category, attached a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H" for Husband, "W" for Wife, "J" for Joint, or "C" for Community in the column labeled "HWJC." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions only in Schedule C - Property Claimed as Exempt.

Do not include interests in executory contracts and unexpired leases on the schedule. List them in Schedule G - Executory Contracts and Unexpired Leased.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property".

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<b>Checking</b>	<b>J</b>	<b>20.00</b>
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, include audio, video, and computer equipment.		<b>Normal and necessary household goods</b>	<b>J</b>	<b>1,500.00</b>
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		<b>Miscellaneous books, pictures, music</b>	<b>J</b>	<b>350.00</b>
6. Wearing apparel.		<b>Used personal clothes</b>		<b>400.00</b>
7. Furs and jewelry.		<b>Watches/Costume jewelry</b>	<b>J</b>	<b>250.00</b>
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issue.	X			
11. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.		<b>401k</b>	<b>J</b>	<b>5,000.00</b>
12. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
13. Interests in partnerships or joint ventures. Itemize.	X			
14. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
15. Accounts receivable.	X			
16. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
17. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			

IN RE Mattox, Richard V &amp; Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE B - PERSONAL PROPERTY**  
**(Continuation Sheet)**

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
18. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	<b>X</b>			
19. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>			
20. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		<b>Owed award from injury suit</b>	<b>H</b>	<b>500,000.00</b>
21. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>			
22. Licenses, franchises, and other general intangibles. Give particulars.	<b>X</b>			
23. Automobiles, trucks, trailers, and other vehicles and accessories.	<b>X</b>			
24. Boats, motors, and accessories.	<b>X</b>			
25. Aircraft and accessories.	<b>X</b>			
26. Office equipment, furnishings, and supplies.	<b>X</b>			
27. Machinery, fixtures, equipment, and supplies used in business.	<b>X</b>			
28. Inventory.	<b>X</b>			
29. Animals.	<b>X</b>			
30. Crops - growing or harvested. Give particulars.	<b>X</b>			
31. Farming equipment and implements.	<b>X</b>			
32. Farm supplies, chemicals, and feed.	<b>X</b>			
33. Other personal property of any kind not already listed. Itemize.	<b>X</b>			
<b>TOTAL</b>				<b>507,520.00</b>

0 continuation sheets attached

(Include amounts from any continuation sheets attached.  
Report total also on Summary of Schedules.)

SCHEDULE B - PERSONAL PROPERTY

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor elects the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. § 522(b)(1): Exemptions provided in 11 U.S.C. § 522(d). NOTE: These exemptions are available only in certain states.☒ 11 U.S.C. § 522(b)(2): Exemptions available under applicable nonbankruptcy federal laws, state or local law where the debtor's domicile has been located for 180 days immediately preceding the filing of the petition, or for a longer portion of the 180-day period than in any other place, and the debtor's interest as a tenant by the entirety or joint tenant to the extent the interest is exempt from process under applicable nonbankruptcy law.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT MARKET VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
<b><u>SCHEDULE B - PERSONAL PROPERTY</u></b>			
Checking	735 ILCS 5 §12-1001(b)	20.00	20.00
Normal and necessary household goods	735 ILCS 5 §12-1001(b)	1,500.00	1,500.00
Miscellaneous books, pictures, music	U.S.C. 42 § 1717	350.00	350.00
Watches/Costume jewelry	735 ILCS 5 §12-1001(b)	250.00	250.00
401k	40 ILCS 5 §§22-230, 4-135, 6-213, 19-117	5,000.00	5,000.00
Owed award from injury suit	735 ILCS 5 §12-1001(b) 735 ILCS 5 §12-1001(h)(4)	2,230.00 15,000.00	500,000.00

IN RE **Mattox, Richard V & Mattox, Kimberly K**

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C," respectively, in the column labeled "HWJC."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☒ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL
							UNSECURED PORTION, IF ANY
Account No.							
			Value \$				
Account No.							
			Value \$				
Account No.							
			Value \$				
Account No.							
			Value \$				
Account No.							
			Value \$				
Subtotal (Total of this page)							
(Complete only on last sheet of Schedule D) <b>TOTAL</b>							
(Report total also on Summary of Schedules)							

0 Continuation Sheets attached



IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C," respectively, in the column labeled "HWJC."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Repeat this total also on the Summary of Schedules.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS**

(Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2)

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(3), as amended by § 1401 of Pub L. 109-8.

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to a maximum of \$4,925\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).

☐ **Deposits by individuals**

Claims of individuals up to a maximum of \$2,225\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6)

☐ **Alimony, Maintenance, or Support**

Claims of a spouse, former spouse, or child of the debtor for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7).

☐ **Taxes and Other Certain Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

\* Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 Continuation Sheets attached

IN RE **Mattox, Richard V & Mattox, Kimberly K**

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code and last four digits of any account number of all entities holding unsecured claims without priority against the debtor or the property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C," respectively, in the column labeled "HWJC."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>1838</b> <b>Allied Int</b> <b>300 CORPORATE EXCH</b> <b>Columbus, OH 43231</b>		<b>H</b>	<b>Open account opened 10/04</b>				<b>52.00</b>
Account No. <b>01 Public Storage Inc</b>			<b>Assignee or other notification for: Allied Int</b>				
Account No. <b>2879</b> <b>Anesthesiologists Ltd</b> <b>185 Penny Ave</b> <b>East Dundee, IL 60118-1454</b>		<b>J</b>	<b>Medical/Dental bill</b>				<b>1,628.00</b>
Account No. <b>7180</b> <b>Asset Acceptance Llc</b> <b>PO Box 2038</b> <b>Warren, MI 48090-2038</b>		<b>W</b>	<b>Open account opened 8/03</b>				<b>867.00</b>
Account No. <b>Sbc Illinois</b>			<b>Assignee or other notification for: Asset Acceptance Llc</b>				
Subtotal (Total of this page)							<b>2,547.00</b>
(Complete only on last sheet of Schedule F) <b>TOTAL</b> (Report total also on Summary of Schedules)							

14 Continuation Sheets attached

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>0223</b> <b>Better Homes And Gardens</b> <b>PO Box 10227</b> <b>Des Moines, IA 50336-0227</b>		<b>J</b>	<b>Subscription fee</b>				<b>25.00</b>
Account No. <b>Camping Life</b> <b>PO Box 392</b> <b>Mount Morris, IL 61054-0392</b>		<b>J</b>	<b>Subscription fee</b>				<b>15.00</b>
Account No. <b>4366</b> <b>Capital 1 Bk</b> <b>11013 W Broad St</b> <b>Glen Allen, VA 23060-5937</b>		<b>H</b>	<b>Revolving account opened 2/02</b>				<b>1,766.00</b>
Account No. <b>Van Ru Credit Corp</b> <b>10024 Skokie Blvd</b> <b>Skokie, IL 60077-1025</b>			<b>Assignee or other notification for: Capital 1 Bk</b>				
Account No. <b>7368</b> <b>Capital 1 Bk</b> <b>11013 W Broad St</b> <b>Glen Allen, VA 23060-5937</b>		<b>H</b>	<b>Revolving account opened 3/02</b>				<b>1,635.00</b>
Account No. <b>4484</b> <b>Capital Management Services</b> <b>726 Exchange St Ste 700</b> <b>Buffalo, NY 14210-1464</b>		<b>J</b>	<b>Collections</b>				<b>1,767.00</b>
Account No. <b>2179</b> <b>Cb Usa Inc</b> <b>PO Box 8000</b> <b>Hammond, IN 46325-8000</b>		<b>W</b>	<b>Unknown account opened 12/04</b>				<b>679.00</b>

Sheet <u>1</u> of <u>14</u> Continuation Sheets attached to Schedule F	Subtotal (Total of this page)	<b>5,887.00</b>
(Complete only on last sheet of Schedule F) <b>TOTAL</b>		
(Report total also on Summary of Schedules)		

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>Med1wellgroup Health Partners Llc</b>			<b>Assignee or other notification for: Cb Usa Inc</b>				
Account No. <b>1676</b> <b>Cb Usa Inc</b> <b>PO Box 8000</b> <b>Hammond, IN 46325-8000</b>		<b>W</b>	<b>Installment account opened 12/03</b>				<b>196.00</b>
Account No. <b>Med1st James Anesthesia</b>			<b>Assignee or other notification for: Cb Usa Inc</b>				
Account No. <b>3743</b> <b>Charles A. Amenta</b> <b>18161 Morris Ave</b> <b>Homewood, IL 60430-2108</b>		<b>J</b>	<b>Medical/Dental bill</b>				<b>27.00</b>
Account No. <b>Collection Accounts Terminal Inc</b> <b>5724 W Diversey Ave</b> <b>Chicago, IL 60639-1203</b>		<b>J</b>	<b>Collections</b>				<b>97.00</b>
Account No. <b>5453</b> <b>Collection Co America</b> <b>700 Longwater Dr</b> <b>Norwell, MA 02061-1624</b>		<b>H</b>	<b>Installment account opened 1/03</b>				<b>60.00</b>
Account No. <b>Affirmative Insurance - Nsf Ch</b>			<b>Assignee or other notification for: Collection Co America</b>				

Sheet 2 of 14 Continuation Sheets attached to Schedule FSubtotal  
(Total of this page)**380.00**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>48</b> <b>Comp Crdt Sr</b> <b>5340 N Clark St</b> <b>Chicago, IL 60640-2120</b>		<b>W</b>	<b>Unknown account opened 4/02</b>				<b>278.00</b>
Account No. <b>Oberweis Dairy</b>			<b>Assignee or other notification for: Comp Crdt Sr</b>				
Account No. <b>0459</b> <b>Cooking Club Of America</b> <b>PO Box 3439</b> <b>Hopkins, MN 55343-2139</b>		<b>J</b>	<b>Membership fee</b>				<b>24.00</b>
Account No. <b>6944</b> <b>Crafters Choice</b> <b>Camp Hill, PA 17012</b>		<b>J</b>					<b>37.00</b>
Account No. <b>1852</b> <b>Creative Home Arts Club</b> <b>PO Box 3470</b> <b>Crete, IL 60417</b>		<b>J</b>	<b>Membership fee</b>				<b>24.00</b>
Account No. <b>Credit Management Services</b> <b>9525 Sweet Valley Dr</b> <b>Cleveland, OH 44125-4237</b>		<b>J</b>	<b>Collections</b>				<b>105.00</b>
Account No. <b>0788</b> <b>Credit Protect Assoc</b> <b>1355 NOEL RD SUITE 2100</b> <b>Dallas, TX 75240</b>		<b>W</b>	<b>Installment account opened 10/02</b>				<b>49.00</b>

Sheet 3 of 14 Continuation Sheets attached to Schedule FSubtotal  
(Total of this page)**517.00**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>Comcast</b>			<b>Assignee or other notification for: Credit Protect Assoc</b>				
Account No. <b>124</b> <b>Credtrs Coll</b> <b>PO Box 63</b> <b>Kankakee, IL 60901-0063</b>		<b>W</b>	<b>Unknown account opened 3/05</b>				<b>394.00</b>
Account No. <b>Aqua America Inc</b>			<b>Assignee or other notification for: Credtrs Coll</b>				
Account No. <b>2083</b> <b>Cross Country Bank</b> <b>PO Box 15371</b> <b>Wilmington, DE 19850-5371</b>		<b>H</b>	<b>Revolving account opened 9/01</b>				<b>895.00</b>
Account No. <b>1968</b> <b>David D. Mayer, DDS</b> <b>1924 Hickory Rd</b> <b>Homewood, IL 60430-2239</b>		<b>J</b>	<b>Medical/Dental bill</b>				<b>203.00</b>
Account No. <b>4461</b> <b>Dependon Collection Se</b> <b>7627 Lake St Ste 210</b> <b>River Forest, IL 60305-1878</b>		<b>J</b>	<b>Open account opened 4/02</b>				<b>6,542.00</b>
Account No. <b>The Wish Center</b>			<b>Assignee or other notification for: Dependon Collection Se</b>				

Sheet 4 of 14 Continuation Sheets attached to Schedule FSubtotal  
(Total of this page)**8,034.00**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>3021</b> <b>Dependon Collection Se</b> <b>7627 Lake St Ste 210</b> <b>River Forest, IL 60305-1878</b>		<b>W</b>	<b>Open account opened 5/04</b>				<b>52.00</b>
Account No. <b>Women S Health Consultants S.c</b>			<b>Assignee or other notification for: Dependon Collection Se</b>				
Account No. <b>4214</b> <b>Eastern Collection Corporation</b> <b>1626 Locust Ave</b> <b>Bohemia, NY 11716-2159</b>		<b>J</b>	<b>Collections</b>				<b>43.00</b>
Account No. <b>5271</b> <b>Emergency Care Health Organization, Ltd</b> <b>PO Box 808</b> <b>Grand Rapids, MI 49518-0808</b>		<b>J</b>	<b>Medical/Dental bill</b>				<b>78.00</b>
Account No. <b>8273</b> <b>Encore Receivable Mana</b> <b>400 N Rogers Rd</b> <b>Olathe, KS 66062-1212</b>		<b>W</b>	<b>Installment account opened 8/04</b>				<b>150.00</b>
Account No. <b>Sbc</b>			<b>Assignee or other notification for: Encore Receivable Mana</b>				
Account No. <b>3fc3</b> <b>Farm Collector</b> <b>1503 SW 42nd St</b> <b>Topeka, KS 66609-1214</b>		<b>J</b>	<b>subscription fee</b>				<b>50.00</b>

Sheet 5 of 14 Continuation Sheets attached to Schedule FSubtotal  
(Total of this page)**373.00**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>4512</b> <b>Fingerhut</b> <b>53 Mcleland Rd</b> <b>Saint Cloud, MN 56395-2076</b>		<b>H</b>	<b>Revolving account opened 10/99</b>				<b>300.00</b>
Account No. <b>5339</b> <b>Gevalia</b> <b>Holmparken Square</b> <b>PO Box 5276</b> <b>Clifton, NJ 07015-5276</b>		<b>J</b>	<b>unknown</b>				<b>57.00</b>
Account No. <b>698</b> <b>Harris</b> <b>600 W Jackson Blvd Ste 700</b> <b>Chicago, IL 60661-5636</b>		<b>H</b>	<b>Unknown account opened 11/04</b>				<b>110.00</b>
Account No. <b>Med1 Advocate South Suburban Hos</b>			<b>Assignee or other notification for: Harris</b>				
Account No. <b>3216</b> <b>Harvard Collection</b> <b>4839 N Elston Ave</b> <b>Chicago, IL 60630-2534</b>		<b>W</b>	<b>Installment account opened 4/01</b>				<b>929.00</b>
Account No. <b>Commonwealth Edison</b>			<b>Assignee or other notification for: Harvard Collection</b>				
Account No. <b>Herrschners Inc.</b> <b>2800 Hoover Rd</b> <b>Stevens Point, WI 54481-7103</b>		<b>J</b>	<b>unknown</b>				<b>42.00</b>

Sheet 6 of 14 Continuation Sheets attached to Schedule F

Subtotal  
(Total of this page) **1,438.00**

(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)



IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>whra</b> <b>JDT Medical Billing</b> <b>6033 N Sheridan Rd Ste N6</b> <b>Chicago, IL 60660-3013</b>		<b>J</b>	<b>Medical/Dental bill</b>				<b>52.00</b>
Account No. <b>1840</b> <b>Jeffcapsys</b> <b>16 Mcleland Rd</b> <b>Saint Cloud, MN 56303-2198</b>		<b>H</b>	<b>Unknown account opened 1/01</b>				<b>300.00</b>
Account No. <b>01 Fingerhut Credit Advantage</b>			<b>Assignee or other notification for:</b> <b>Jeffcapsys</b>				
Account No. <b>4234</b> <b>Kca Financial Svcs</b> <b>628 North St</b> <b>Geneva, IL 60134-1356</b>		<b>W</b>	<b>Open account opened 4/05</b>				<b>6,492.00</b>
Account No. <b>Wish Center Llc</b>			<b>Assignee or other notification for:</b> <b>Kca Financial Svcs</b>				
Account No. <b>1378</b> <b>Keepsake Calendar</b> <b>PO Box 10883</b> <b>Des Moines, IA 50336-0883</b>		<b>J</b>	<b>Retail purchase</b>				<b>16.00</b>
Account No. <b>0001</b> <b>Marcotte Medical Group</b> <b>117 S Harlem Ave</b> <b>Peotone, IL 60468-9138</b>		<b>J</b>	<b>Medical/Dental bill</b>				<b>43.00</b>

Sheet 7 of 14 Continuation Sheets attached to Schedule FSubtotal  
(Total of this page)**6,903.00**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>d045</b> <b>Med Busi Bur</b> <b>1460 RENAISSANCE D SUITE 400</b> <b>Park Ridge, IL 60068</b>		<b>W</b>	<b>Unknown account opened 4/04</b>				<b>244.00</b>
Account No. <b>Med1anesthesiologists Ltd</b>			<b>Assignee or other notification for: Med Busi Bur</b>				
Account No. <b>116</b> <b>Med Coll Sys</b> <b>175 W Jackson Blvd</b> <b>Chicago, IL 60604-2615</b>		<b>W</b>	<b>Unknown account opened 9/98</b>				<b>110.00</b>
Account No. <b>Med1radiology Center S C Rad</b>			<b>Assignee or other notification for: Med Coll Sys</b>				
Account No. <b>2256</b> <b>Millenium Credit Consult</b> <b>PO Box 18160</b> <b>Saint Paul, MN 55118-0160</b>		<b>J</b>	<b>Collections</b>				<b>131.00</b>
Account No. <b>8271</b> <b>Mutual Hospital Services</b> <b>2525 N Shadeland Ave Ste</b> <b>Indianapolis, IN 46219-1787</b>		<b>W</b>	<b>Open account opened 12/03</b>				<b>567.00</b>
Account No. <b>St James Hosp</b>			<b>Assignee or other notification for: Mutual Hospital Services</b>				

Sheet 8 of 14 Continuation Sheets attached to Schedule FSubtotal  
(Total of this page)**1,052.00**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>8268</b> <b>Mutual Hospital Services</b> <b>2525 N Shadeland Ave Ste</b> <b>Indianapolis, IN 46219-1787</b>		<b>W</b>	<b>Open account opened 12/03</b>				<b>567.00</b>
Account No. <b>St James Hosp</b>			<b>Assignee or other notification for:</b> <b>Mutual Hospital Services</b>				
Account No. <b>4287</b> <b>Mutual Hospital Services</b> <b>2525 N Shadeland Ave Ste</b> <b>Indianapolis, IN 46219-1787</b>		<b>W</b>	<b>Open account opened 8/02</b>				<b>70.00</b>
Account No. <b>St Margaret Mercy Hosp</b>			<b>Assignee or other notification for:</b> <b>Mutual Hospital Services</b>				
Account No. <b>9651</b> <b>Mutual Hospital Services</b> <b>2525 N Shadeland Ave Ste</b> <b>Indianapolis, IN 46219-1787</b>		<b>H</b>	<b>Open account opened 11/00</b>				<b>37.00</b>
Account No. <b>St Margaret Mercy Hosp</b>			<b>Assignee or other notification for:</b> <b>Mutual Hospital Services</b>				
Account No. <b>5714</b> <b>Nco-marlin</b> <b>PO Box 8529</b> <b>Philadelphia, PA 19101-8529</b>		<b>W</b>	<b>Open account opened 4/02</b>				<b>81.00</b>

Sheet 9 of 14 Continuation Sheets attached to Schedule F

Subtotal  
(Total of this page) **755.00**

(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>Certgy</b>			<b>Assignee or other notification for: Nco-marlin</b>				
Account No. <b>4734</b> <b>Nco/ Collection Agency</b> <b>PO Box 41448</b> <b>Philadelphia, PA 19101-1448</b>		<b>W</b>	<b>Open account opened 3/05</b>				<b>150.00</b>
Account No. <b>Nco Assignee Of Sbc</b>			<b>Assignee or other notification for: Nco/ Collection Agency</b>				
Account No. <b>6437</b> <b>North Shore Agency</b> <b>751 Summa Ave</b> <b>Westbury, NY 11590-5010</b>		<b>J</b>					<b>24.00</b>
Account No. <b>4722</b> <b>Nrthestcrcol</b> <b>120 KEYSER</b> <b>Scranton, PA 18504</b>		<b>W</b>	<b>Unknown account opened 6/04</b>				<b>1,309.00</b>
Account No. <b>Education Direct</b>			<b>Assignee or other notification for: Nrthestcrcol</b>				
Account No. <b>2033</b> <b>Osi Collection Service</b> <b>2425 Commerce Ave Ste 10</b> <b>Duluth, GA 30096-4980</b>		<b>W</b>	<b>Open account opened 12/04</b>				<b>31.00</b>

Sheet 10 of 14 Continuation Sheets attached to Schedule F

Subtotal  
(Total of this page) **1,514.00**

(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>At T</b>			<b>Assignee or other notification for: Osi Collection Service</b>				
Account No. <b>2033</b> <b>Palisades Collections</b> <b>PO Box 105460</b> <b>Atlanta, GA 30348-5460</b>		<b>W</b>	<b>Open account opened 1/02</b>				<b>31.00</b>
Account No. <b>At T</b>			<b>Assignee or other notification for: Palisades Collections</b>				
Account No. <b>0321</b> <b>Park Dansan</b> <b>PO Box 248</b> <b>Gastonia, NC 28053-0248</b>		<b>W</b>	<b>Unknown account opened 11/03</b>				<b>518.00</b>
Account No. <b>Mci Communications L 3</b>			<b>Assignee or other notification for: Park Dansan</b>				
Account No. <b>7021</b> <b>Park Dansan Collections</b> <b>113 W 3rd Ave</b> <b>Gastonia, NC 28052-4320</b>		<b>W</b>	<b>Open account opened 12/04</b>				<b>518.00</b>
Account No. <b>Mci Communications L 4</b>			<b>Assignee or other notification for: Park Dansan Collections</b>				

Sheet 11 of 14 Continuation Sheets attached to Schedule FSubtotal  
(Total of this page)**1,067.00**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>iple</b> <b>Reiman Publications</b> <b>PO Box 992</b> <b>Greendale, WI 53129-0992</b>		<b>J</b>	<b>Subscription fee</b>				<b>48.00</b>
Account No. <b>0001</b> <b>RMCB</b> <b>2269 Saw Mill River Rd Ste 3</b> <b>Elmsford, NY 10523-3839</b>		<b>J</b>	<b>Collections</b>				<b>70.00</b>
Account No. <b>6787</b> <b>Rmi/mcsi</b> <b>18241 West St</b> <b>Lansing, IL 60438-3200</b>		<b>W</b>	<b>Unknown account opened 6/02</b>				<b>188.00</b>
Account No. <b>Med1 Women For Women Health Care</b>			<b>Assignee or other notification for:</b> <b>Rmi/mcsi</b>				
Account No. <b>4273</b> <b>Rskmgtnan4</b> <b>PO Box 105062</b> <b>Atlanta, GA 30348-5062</b>		<b>H</b>	<b>Open account opened 6/05</b>				<b>132.00</b>
Account No. <b>Directv Inc.</b>			<b>Assignee or other notification for:</b> <b>Rskmgtnan4</b>				
Account No. <b>2019</b> <b>Scholastic</b> <b>PO Box 6001</b> <b>Jefferson City, MO 65102-6001</b>		<b>J</b>					<b>45.00</b>

Sheet 12 of 14 Continuation Sheets attached to Schedule FSubtotal  
(Total of this page)**483.00**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>9871</b> <b>Silkies</b> <b>Billing Center</b> <b>PO Box 70101</b> <b>Philadelphia, PA 19176-0101</b>		<b>J</b>					<b>17.00</b>
Account No. <b>2355</b> <b>St. James Hospital - Anesthesia</b> <b>PO Box 732</b> <b>Chicago Heights, IL 60412-0732</b>		<b>J</b>	<b>Medical/Dental bill</b>				<b>196.50</b>
Account No. <b>8720</b> <b>Suburban Heights Medical Center</b> <b>PO Box 515</b> <b>Chicago Heights, IL 60412-0515</b>		<b>J</b>	<b>Medical/Dental bill</b>				<b>910.00</b>
Account No. <b>9327</b> <b>T Mobile, Bankruptcy</b> <b>PO Box 37380</b> <b>Albuquerque, NM 87176-7380</b>		<b>J</b>	<b>Utility bill</b>				<b>64.00</b>
Account No. <b>9877</b> <b>The Eye Specialists Center</b> <b>10436 Southwest Hwy Ste 1</b> <b>Chicago Ridge, IL 60415-1427</b>		<b>J</b>	<b>Medical/Dental bill</b>				<b>375.00</b>
Account No. <b>6069</b> <b>The Star</b> <b>6901 159th St</b> <b>Tinley Park, IL 60477-1789</b>		<b>J</b>	<b>Subscription fee</b>				<b>26.00</b>
Account No. <b>0974</b> <b>The Wish Center</b> <b>2801 Finley Rd. #220</b> <b>Chicago, IL 60615</b>		<b>J</b>	<b>Medical/Dental bill</b>				<b>6,541.00</b>

Sheet 13 of 14 Continuation Sheets attached to Schedule F

Subtotal  
(Total of this page) **8,129.50**

(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>2800</b> <b>Tinley Primary Care</b> <b>17148 Harlem Ave</b> <b>Tinley Park, IL 60477-3370</b>		<b>J</b>	<b>Medical/Dental bill</b>				<b>62.00</b>
Account No. <b>5798</b> <b>Torres Credit Srv</b> <b>27 Fairview St Ste 301</b> <b>Carlisle, PA 17013-3121</b>		<b>H</b>	<b>Open account opened 2/05</b>				<b>314.00</b>
Account No. <b>Commonwealth Edison Co</b>			<b>Assignee or other notification for:</b> <b>Torres Credit Srv</b>				
Account No. <b>8720</b> <b>Well Group</b> <b>333 Dixie Hwy</b> <b>Chicago Heights, IL 60411-1748</b>		<b>J</b>	<b>Medical/Dental bill</b>				<b>50.00</b>
Account No. <b>8564</b> <b>Will County Health Dept.</b> <b>501 Ella Ave</b> <b>Joliet, IL 60433-2799</b>		<b>J</b>	<b>Medical/Dental bill</b>				<b>65.00</b>
Account No. <b>6551</b> <b>Willabee And Ward</b> <b>677 Connecticut Ave</b> <b>Norwalk, CT 06857-0001</b>		<b>J</b>	<b>Subscription fee</b>				<b>34.00</b>
Account No.							

Sheet 14 of 14 Continuation Sheets attached to Schedule F

Subtotal  
(Total of this page) **525.00**

(Complete only on last sheet of Schedule F) **TOTAL 39,604.50**

(Report total also on Summary of Schedules)



IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests.

State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease.

Provide the names and complete addresses of all other parties to each lease or contract described.

**NOTE:** A party listed on this schedule will not receive notice of the filing of this case unless the party is also scheduled in the appropriate schedule of creditors.

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. In community property states, a married debtor not filing a joint case should report the name and address of the nondebtor spouse on this schedule. Include all names used by the nondebtor spouse during the six years immediately preceding the commencement of this case.

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Debtor's Marital Status <b>Married</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP	AGE
EMPLOYMENT: DEBTOR		SPOUSE
Occupation <b>Labor</b> Name of Employer <b>Schoops Hamburgers</b> How long employed <b>New Hire - Part Time</b> Address of Employer		<b>Unemployed</b>  <b>6 Months</b>

Income: (Estimate of average monthly income)

Current Monthly gross wages, salary, and commissions (pro rata if not paid monthly)

Estimated monthly overtime

**SUBTOTAL****LESS PAYROLL DEDUCTIONS**

a. Payroll taxes and Social Security

b. Insurance

c. Union dues

d. Other (specify) \_\_\_\_\_

**SUBTOTAL OF PAYROLL DEDUCTIONS****TOTAL NET MONTHLY TAKE HOME PAY**

Regular income from operation of business or profession or farm (attach detailed statement)

Income from real property

Interest and dividends

Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above

Social Security or other government assistance

(Specify) **Unemployment**

Pension or retirement income

Other monthly income

(Specify) \_\_\_\_\_

**TOTAL MONTHLY INCOME****TOTAL COMBINED MONTHLY INCOME \$ 2,599.49** (Report also on Summary of Schedules)

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

Rent or home mortgage payment (include lot rented for mobile home)	\$ <u>800.00</u>
Are real estate taxes included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Is property insurance included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Utilities: Electricity and heating fuel	\$ <u>145.00</u>
Water and sewer	\$ _____
Telephone	\$ <u>90.00</u>
Other <b>Cell Phone</b>	\$ <u>75.00</u>
_____	\$ _____
_____	\$ _____
Home maintenance (repairs and upkeep)	\$ _____
Food	\$ <u>600.00</u>
Clothing	\$ <u>200.00</u>
Laundry and dry cleaning	\$ <u>90.00</u>
Medical and dental expenses	\$ <u>150.00</u>
Transportation (not including car payments)	\$ <u>275.00</u>
Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ <u>40.00</u>
Charitable contributions	\$ _____
Insurance (not deducted from wages or included in home mortgage payments)	
Homeowner's or renter's	\$ _____
Life	\$ _____
Health	\$ _____
Auto	\$ _____
Other _____	\$ _____
_____	\$ _____
_____	\$ _____
Taxes (not deducted from wages or included in home mortgage payments)	
(Specify) _____	\$ _____
_____	\$ _____
_____	\$ _____
Installment payments (in chapter 12 and 13 cases, do not list payments to be included in the plan)	
Auto	\$ _____
Other _____	\$ _____
_____	\$ _____
Alimony, maintenance, and support paid to others	\$ _____
Payments for support of additional dependents not living at your home	\$ _____
Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$ _____
Other <b>Personal Care</b>	\$ <u>120.00</u>
<b>Bank Fees And Postage</b>	\$ <u>45.00</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____

**TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)** \$ 2,630.00

**(FOR CHAPTER 12 AND 13 DEBTORS ONLY)**

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

- |   |          |
|---|----------|
| A. Total projected monthly income               | \$ _____ |
| B. Total projected monthly expenses             | \$ _____ |
| C. Excess income (A minus B)                    | \$ _____ |
| D. Total amount to be paid into plan each _____ | \$ _____ |

(interval)

IN RE Mattox, Richard V & Mattox, Kimberly K

Case No. \_\_\_\_\_

Debtor(s)

**DECLARATION CONCERNING DEBTOR'S SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 26 sheets, and that  
(Total shown on summary page plus 1)  
 they are true and correct to the best of my knowledge, information, and belief.

Date: October 14, 2005 Signature: /s/ Richard V Mattox  
Richard V Mattox

Debtor

Date: October 14, 2005 Signature: /s/ Kimberly K Mattox  
Kimberly K Mattox

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

**CERTIFICATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.

Printed or Typed Name of Bankruptcy Petition Preparer

 Social Security No.  
 (Required by 11 U.S.C. § 110(c).)

Address

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

Signature of Bankruptcy Petition Preparer

Date

*A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedures may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the \_\_\_\_\_ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the \_\_\_\_\_  
 (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets, and that they are true and correct to the best of my knowledge, information, and belief.  
(Total shown on summary page plus 1)

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

**Penalty for making a false statement or concealing property. Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.**

IN RE:

Mattox, Richard V & Mattox, Kimberly K

Debtor(s)

Case No. \_\_\_\_\_

Chapter 7

**BUSINESS INCOME AND EXPENSES**

**FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS** (Note: ONLY INCLUDE information directly related to the business operation.)

**PART A - GROSS BUSINESS INCOME FOR THE PREVIOUS 12 MONTHS:**

1. Gross Income For 12 Months Prior to Filing: \$ \_\_\_\_\_

**PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:**

2. Gross Monthly Income: \$ 500.00

**PART C - ESTIMATED FUTURE MONTHLY EXPENSES:**

3. Net Employee Payroll (Other Than Debtor) \$ \_\_\_\_\_  
4. Payroll Taxes \$ \_\_\_\_\_  
5. Unemployment Taxes \$ \_\_\_\_\_  
6. Worker's Compensation \$ \_\_\_\_\_  
7. Other Taxes \$ \_\_\_\_\_  
8. Inventory Purchases (Including raw materials) \$ \_\_\_\_\_  
9. Purchase of Feed/Fertilizer/Seed/Spray \$ \_\_\_\_\_  
10. Rent (Other than debtor's principal residence) \$ \_\_\_\_\_  
11. Utilities \$ \_\_\_\_\_  
12. Office Expenses and Supplies \$ \_\_\_\_\_  
13. Repairs and Maintenance \$ \_\_\_\_\_  
14. Vehicle Expenses \$ \_\_\_\_\_  
15. Travel and Entertainment \$ \_\_\_\_\_  
16. Equipment Rental and Leases \$ \_\_\_\_\_  
17. Legal/Accounting/Other Professional Fees \$ \_\_\_\_\_  
18. Insurance \$ \_\_\_\_\_  
19. Employee Benefits (e.g., pension, medical, etc.) \$ \_\_\_\_\_  
20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts (Specify): \$ \_\_\_\_\_

21. Other (Specify): \$ \_\_\_\_\_

22. Total Monthly Expenses (Add items 3-21) \$ \_\_\_\_\_

**PART D - ESTIMATED AVERAGE NET MONTHLY INCOME**

23. **AVERAGE NET MONTHLY INCOME** (Subtract Item 22 from Item 2) \$ 500.00

Document Page 31 of 41  
 United States Bankruptcy Court  
 Northern District of Illinois

IN RE:

Case No. \_\_\_\_\_

Mattox, Richard V & Mattox, Kimberly KChapter 7

Debtor(s)

### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs.

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### DEFINITIONS

**"In business."** A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed.

**"Insider."** The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE (if more than one)
<b>45,000.00</b>	<b>2003 Income from employment</b>
<b>45,000.00</b>	<b>2004 Income from employment</b>
<b>22,000.00</b>	<b>2005 YTD Income from employment</b>

#### 2. Income other than from employment or operation of business

None ☐ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
<b>10,000.00</b>	<b>05 Unemployment</b>

#### 3. Payments to creditors

None ☒ a. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within **90 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

None ☒ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

None ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
Value Auto	July 2005	

6. Assignments and receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Gleason And MacMaster LLC 77 W Washington St Ste 1218 Chicago, IL 60602-3246	8/02/2005	526.00

10. Other transfers

None ☒ List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)



#### 11. Closed financial accounts

- None ☐ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, association, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 12. Safe deposit boxes

- None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 13. Setoffs

- None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 14. Property held for another person

- None ☒ List all property owned by another person that the debtor holds or controls.

#### 15. Prior address of debtor

- None ☒ If the debtor has moved within the **two years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

#### 16. Spouses and Former Spouses

- None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the **six-year period** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

#### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

- None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

- None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

- None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

**18. Nature, location and name of business**

None ☒ a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: **October 14, 2005** Signature /s/ Richard V Mattox  
of Debtor **Richard V Mattox**

Date: **October 14, 2005** Signature /s/ Kimberly K Mattox  
of Joint Debtor **Kimberly K Mattox**  
(if any)

0 continuation pages attached

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.*

IN RE:

Case No. \_\_\_\_\_

Mattox, Richard V & Mattox, Kimberly K

Chapter 7

Debtor(s)

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

1. I have filed a schedule of assets and liabilities which includes consumer debts secured by property of the estate.
2. I intend to do the following with respect to the property of the estate which secures those consumer debts:

*a. Property to be Surrendered*

DESCRIPTION OF PROPERTY

CREDITOR'S NAME

**None**

*b. Property to be Retained [Check any applicable statement.]*

DESCRIPTION OF PROPERTY

CREDITOR'S NAME

PROPERTY  
IS CLAIMED  
AS EXEMPT

PROPERTY  
WILL BE  
REDEEMED  
PURSUANT  
TO 11 U.S.C.  
§ 722

DEBT WILL  
BE RE-  
AFFIRMED  
PURSUANT  
TO 11 U.S.C.  
§ 524(C)

**None**

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10/14/2005

Date

/s/ Richard V Mattox

Richard V Mattox

Debtor

/s/ Kimberly K Mattox

Kimberly K Mattox

Joint Debtor (if applicable)

**CERTIFICATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.

\_\_\_\_\_  
Printed or Typed Name of Bankruptcy Petition Preparer

\_\_\_\_\_  
Social Security No.

(Required by 11 U.S.C. § 110(c).)

\_\_\_\_\_  
Address

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

\_\_\_\_\_  
Signature of Bankruptcy Petition Preparer

\_\_\_\_\_  
Date

*A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedures may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

## NOTICE TO INDIVIDUAL CONSUMER DEBTOR

The purpose of this notice is to acquaint you with the four chapters of the federal Bankruptcy Code under which you may file a bankruptcy petition. The bankruptcy law is complicated and not easily described. Therefore, you should seek the advice of an attorney to learn of your rights and responsibilities under the law should you decide to file a petition with the court. Neither the judge nor the court's employees may provide you with legal advice.

### **Chapter 7: Liquidation (\$155 filing fee plus \$39 administrative fee plus \$15 trustee surcharge)\***

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts.
2. Under Chapter 7 a trustee takes possession of all your property. You may claim certain of your property as exempt under governing law. The trustee then liquidates the property and uses the proceeds to pay your creditors according to priorities of the Bankruptcy Code.
3. The purpose of filing a Chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, your discharge may be denied by the court, and the purpose for which you filed the bankruptcy petition will be defeated.
4. Even if you receive a discharge, there are some debts that are not discharged under the law. Therefore, you may still be responsible for such debts as certain taxes and student loans, alimony and support payments, criminal restitution, and debts for death or personal injury caused by driving while intoxicated from alcohol or drugs.
5. Under certain circumstances you may keep property that you have purchased subject to a valid security interest. Your attorney can explain the options that are available to you.

### **Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$155 filing fee plus \$39 administrative fee)\***

1. Chapter 13 is designed for individuals with regular income who are temporarily unable to pay their debts but would like to pay them in installments over a period of time. You are only eligible for Chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
2. Under Chapter 13 you must file a plan with the court to repay your creditors all or part of the money that you owe them, using your future earnings. Usually the period allowed by the court to repay your debts is three years, but not more than five years. Your plan must be approved by the court before it can take effect.
3. Under Chapter 13, unlike Chapter 7, you may keep all your property, both exempt and non-exempt, as long as you continue to make payments under the plan.
4. After completion of payments under your plan, your debts are discharged except alimony and support payments, student loans, certain debts including criminal fines and restitution and debts for death or personal injury caused by driving while intoxicated from alcohol or drugs, and long term secured obligations.

### **Chapter 11: Reorganization (\$800 filing fee plus \$39 administrative fee)\***

Chapter 11 is designed primarily for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision for an individual to file a Chapter 11 petition should be reviewed with an attorney.

### **Chapter 12: Family Farmer (\$200 filing fee plus \$39 administrative fee)\***

Chapter 12 is designed to permit family farmers to repay their debts over a period of time from future earnings and is in many ways similar to a Chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family owned farm.

\* Fees are subject to change and should be confirmed before filing.

## ACKNOWLEDGEMENT

I, the debtor, affirm that I have read this notice.

Case Number

October 14, 2005

Date

/s/ Richard V Mattox

Richard V Mattox

Debtor

/s/ Kimberly K Mattox

Kimberly K Mattox

Joint Debtor, if any

**INSTRUCTIONS:** If the debtor is an individual, a copy of this notice personally signed by the debtor must accompany any bankruptcy petition filed with the Clerk. If filed by joint debtors, the notice must be personally signed by each. Failure to comply may result in the petition not being accepted for filing.

IN RE:

Case No. \_\_\_\_\_

Mattox, Richard V & Mattox, Kimberly K

Chapter 7

Debtor(s)

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ **526.00**

Prior to the filing of this statement I have received ..... \$ **526.00**

Balance Due ..... \$ **0.00**

2. The source of the compensation paid to me was: ☒ Debtor ☐ Other (specify):
3. The source of compensation to be paid to me is: ☐ Debtor ☐ Other (specify):
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
  - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
  - d. ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
  - e. [Other provisions as needed]

6. By agreement with the debtor(s), the above disclosed fee does not include the following services:

**Motions to Redeem  
Litigation**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**October 14, 2005**

Date

**/s/ Sarah R MacMaster**

Signature of Attorney

**Gleason And MacMaster**

Name of Law Firm

IN RE:

Case No. \_\_\_\_\_

Mattox, Richard V & Mattox, Kimberly K

Chapter 7

Debtor(s)

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors 72

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: October 14, 2005

/s/ Richard V Mattox

Debtor

/s/ Kimberly K Mattox

Joint Debtor

Mattox, Richard V  
3347 W Exchange St  
Crete, IL 60417-2042

Cb Usa Inc  
PO Box 8000  
Hammond, IN 46325-8000

Credit Management Services  
9525 Sweet Valley Dr  
Cleveland, OH 44125-4237

Mattox, Kimberly K  
3347 W Exchange St  
Crete, IL 60417-2042

Certegy Payment Reovery Services  
11601 Roosevelt Blvd N  
Saint Petersburg, FL 33716-2202

Credit Protect Assoc  
1355 NOEL RD SUITE 2100  
Dallas, TX 75240

Gleason And MacMaster  
77 W Washington, Ste 1218  
Chicago, IL 60602

Charles A. Amenta  
18161 Morris Ave  
Homewood, IL 60430-2108

Credtrs Coll  
PO Box 63  
Kankakee, IL 60901-0063

Allied Int  
300 CORPORATE EXCH  
Columbus, OH 43231

ChexSystems  
Consumer Relations  
12005 Ford Rd Ste 600  
Dallas, TX 75234-7253

Cross Country Bank  
PO Box 15371  
Wilmington, DE 19850-5371

Anesthesiologists Ltd  
185 Penny Ave  
East Dundee, IL 60118-1454

Collection Accounts Terminal Inc  
5724 W Diversey Ave  
Chicago, IL 60639-1203

David D. Mayer, DDS  
1924 Hickory Rd  
Homewood, IL 60430-2239

Asset Acceptance Llc  
PO Box 2038  
Warren, MI 48090-2038

Collection Co America  
700 Longwater Dr  
Norwell, MA 02061-1624

Dependon Collection Se  
7627 Lake St Ste 210  
River Forest, IL 60305-1878

Better Homes And Gardens  
PO Box 10227  
Des Moines, IA 50336-0227

Comp Crdt Sr  
5340 N Clark St  
Chicago, IL 60640-2120

DPPS/SCAN  
Attn: Consumer Referral Services  
7805 Hudson Rd Ste 100  
Woodbury, MN 55125-1595

Camping Life  
PO Box 392  
Mount Morris, IL 61054-0392

Cooking Club Of America  
PO Box 3439  
Hopkins, MN 55343-2139

Eastern Collection Corporation  
1626 Locust Ave  
Bohemia, NY 11716-2159

Capital 1 Bk  
11013 W Broad St  
Glen Allen, VA 23060-5937

Crafters Choice  
Camp Hill, PA 17012

Emergency Care Health Organization, Ltd  
PO Box 808  
Grand Rapids, MI 49518-0808

Capital Management Services  
726 Exchange St Ste 700  
Buffalo, NY 14210-1464

Creative Home Arts Club  
PO Box 3470  
Crete, IL 60417

Encore Receivable Mana  
400 N Rogers Rd  
Olathe, KS 66062-1212

Equifax  
PO Box 740241  
Atlanta, GA 30374-0241

Kca Financial Svcs  
628 North St  
Geneva, IL 60134-1356

Nrthestrcl  
120 KEYSER  
Scranton, PA 18504

Experian  
PO Box 2002  
Allen, TX 75013-2002

Keepsake Calendar  
PO Box 10883  
Des Moines, IA 50336-0883

Osi Collection Service  
2425 Commerce Ave Ste 10  
Duluth, GA 30096-4980

Farm Collector  
1503 SW 42nd St  
Topeka, KS 66609-1214

Marcotte Medical Group  
117 S Harlem Ave  
Peotone, IL 60468-9138

Palisades Collections  
PO Box 105460  
Atlanta, GA 30348-5460

Fingerhut  
53 Mcleland Rd  
Saint Cloud, MN 56395-2076

Med Busi Bur  
1460 RENAISSANCE D SUITE 400  
Park Ridge, IL 60068

Park Dansan  
PO Box 248  
Gastonia, NC 28053-0248

Gevalia  
Holmparken Square  
PO Box 5276  
Clifton, NJ 07015-5276

Med Coll Sys  
175 W Jackson Blvd  
Chicago, IL 60604-2615

Park Dansan Collections  
113 W 3rd Ave  
Gastonia, NC 28052-4320

Harris  
600 W Jackson Blvd Ste 700  
Chicago, IL 60661-5636

Millenium Credit Consult  
PO Box 18160  
Saint Paul, MN 55118-0160

Reiman Publications  
PO Box 992  
Greendale, WI 53129-0992

Harvard Collection  
4839 N Elston Ave  
Chicago, IL 60630-2534

Mutual Hospital Services  
2525 N Shadeland Ave Ste  
Indianapolis, IN 46219-1787

RMCB  
2269 Saw Mill River Rd Ste 3  
Elmsford, NY 10523-3839

Herrschners Inc.  
2800 Hoover Rd  
Stevens Point, WI 54481-7103

Nco-marlin  
PO Box 8529  
Philadelphia, PA 19101-8529

Rmi/mcsi  
18241 West St  
Lansing, IL 60438-3200

JDT Medical Billing  
6033 N Sheridan Rd Ste N6  
Chicago, IL 60660-3013

Nco/ Collection Agency  
PO Box 41448  
Philadelphia, PA 19101-1448

Rskmgtnan4  
PO Box 105062  
Atlanta, GA 30348-5062

Jeffcapsys  
16 Mcleland Rd  
Saint Cloud, MN 56303-2198

North Shore Agency  
751 Summa Ave  
Westbury, NY 11590-5010

Scholastic  
PO Box 6001  
Jefferson City, MO 65102-6001



Silkies  
Billing Center  
PO Box 70101  
Philadelphia, PA 19176-0101

Trans Union  
PO Box 1000  
Crum Lynne, PA 19022-2001

St. James Hospital - Anesthesia  
PO Box 732  
Chicago Heights, IL 60412-0732

Van Ru Credit Corp  
10024 Skokie Blvd  
Skokie, IL 60077-1025

Suburban Heights Medical Center  
PO Box 515  
Chicago Heights, IL 60412-0515

Well Group  
333 Dixie Hwy  
Chicago Heights, IL 60411-1748

T Mobile, Bankruptcy  
PO Box 37380  
Albuquerque, NM 87176-7380

Will County Health Dept.  
501 Ella Ave  
Joliet, IL 60433-2799

Telecheck  
PO Box 17390  
Denver, CO 80217-0390

Willabee And Ward  
677 Connecticut Ave  
Norwalk, CT 06857-0001

The Eye Specialists Center  
10436 Southwest Hwy Ste 1  
Chicago Ridge, IL 60415-1427

The Star  
6901 159th St  
Tinley Park, IL 60477-1789

The Wish Center  
2801 Finley Rd. #220  
Chicago, IL 60615

Tinley Primary Care  
17148 Harlem Ave  
Tinley Park, IL 60477-3370

Torres Credit Srv  
27 Fairview St Ste 301  
Carlisle, PA 17013-3121